

# 12 ways we were wrong about COVID

written by Dr. Ronald Hoffman | May 29, 2021



As death rates and hospitalizations plummet in the U.S. and as we commemorate a year from the early days of peak COVID, it's useful to reflect on what we got wrong about the pandemic. Here's my offering:

**No, it didn't kill many millions in the US.** Bad enough that nearly 600,000 died, with additional millions worldwide. But I recall early modeling studies that were based on the high rate of fatalities on the cruise ships and in Italy and Spain, and their predictions were pretty grim—2.2 million in the US alone.

**No, it didn't burn itself out last fall.** I thought there was a possibility of this, even absent a vaccine. After all, the 1918 flu receded of its own accord, but not without killing tens of millions worldwide. Instead, COVID surged after the holidays, prolonging lockdowns into 2021. Maybe I was just jumping the gun: Scientists now report "Within the next decade, the novel coronavirus responsible for COVID-19 could become little more than a nuisance, causing no more than common cold-like coughs and sniffles."

**Swabbing surfaces.** All those disinfectant wipes? Leaving grocery deliveries outside your door for a couple of days to let the viral particles die? Obsessive handwashing? It turns out that the virus, while detectable on surfaces, probably isn't transmitted that way. It's the aerosol route, especially indoors, that's conducive to spread.

**Masking outdoors.** Masking may work, to some extent, indoors where people congregate in closed spaces, but it never made sense to insist people wear masks outdoors when jogging or cycling. It's not as if exercisers cast a plume of infectious material into the air where it remains suspended to infect passersby. Even before the CDC lifted the outdoor mask mandate for vaccinated individuals, researchers cast doubt on the likelihood that outdoor transmission contributed to spread.

**Those fever guns.** Everywhere you went, people were pointing non-contact infrared thermometers at your forehead. Besides the fact that they're not all that accurate, only a minority of people with COVID spike a fever. Additionally, they do nothing to curb asymptomatic or pre-symptomatic transmission. But they do promote a false sense of security.

**No, society did not unite and maintain disciplined social order during the pandemic.** As a New Yorker, I recall with a sense of civic pride how 9-11 prompted a spirit of unity and common purpose. I thought the same thing was happening when the pandemic forced a lockdown as New York City became the epicenter of the pandemic. We dutifully got out on our balconies and applauded the first responders and health care workers on the front lines, masked up, and stayed home. But it didn't last. Crime proliferated, political polarization escalated, homeless folks flooded midtown, and riots and looting ensued. Rates of substance abuse and suicide soared.

**No, those "tin foil hat" conspiracy theories about COVID origins turn out to be plausible.** When COVID first roared out of China, I believed it was fully likely that it, like AIDS, SARS, and Lyme Disease, developed in nature, and then made the jump to humans due to natural selection of disease agents. This has happened since time immemorial. I dismissed theories that attempted to characterize the novel coronavirus as "man-made". But having reviewed the science, I'm now firmly convinced that COVID-19 escaped from the Wuhan Institute of Virology which was conducting highly dangerous gain-of-function research. And this is not mere China-bashing; many credible virologists with scientific credentials far weightier than mine are now favoring this theory. Due to Chinese secrecy, we'll never know for sure, but this makes Chernobyl look like child's play.

**No, it didn't take 3-5 years to develop a vaccine.** It usually takes years to successfully develop and test a new vaccine. The effort to create a vaccine for a previous coronavirus—SARS—was unsuccessful. Along with many experts, I was surprised that developers came up with multiple vaccines for COVID within months. Moreover, based on the track record of the flu vaccine, which is only of middling efficacy, I didn't anticipate the COVID vaccines would be that protective. And, notwithstanding some rare serious side effects, they appear, at least in the short term, not to cause serious harms. The ingenuity of the scientific establishment is to be applauded.

**No, kids were probably not responsible for spreading it.** Anybody who is around kids knows that they can be Typhoid Marys. They bring home all kinds of pathogens and pretty soon you, too, are sneezing and coughing with a nasty bug. Naturally, health authorities thought they'd be superspreaders propagating COVID, so we shut schools, playgrounds, banned team sports, canceled summer camps, and enforced mask mandates on tiny kids. In retrospect, that was wrong. New research from Israel finds that children up to age 9 have little to do with the spread of the coronavirus. When they do catch it, they usually do fine, experiencing only mild symptoms.

**No, lockdowns were less effective than we thought.** While some studies support shelter-in-place measures, others challenge the assertion that they reined in COVID. Supporting this view is the fact that less-stringent restrictions in states like Texas and Florida have so far not unleashed a "fourth wave".

**No, the variants haven't eluded vaccines (yet).** Some have predicted that the rapidly-mutating virus will bypass current vaccines. Developers are racing to design boosters that address variants should they emerge later this year, but so far, current vaccines continue to confer substantial protection against

even the newer forms of the coronavirus.

**Supplements don't work (they say).** From the earliest days of the pandemic, we were warned not to rely on supplements to ward off COVID. But numerous studies show that, while supplements are no panacea for COVID, they may provide benefits. Yet, even as the Office of Dietary Supplements published a review of the compelling evidence for the use of various natural products, they persisted in adding the caveat: *"Data are insufficient to support recommendations for or against the use of any vitamin, mineral, herb or other botanical, fatty acid, or other dietary supplement ingredient to prevent or treat COVID-19."* In other words, they want us to curb our enthusiasm. But does a government pronouncement that discourages supplement use during a pandemic serve the public interest when we need "all-of-the-above" solutions for COVID?

History is replete with misguided and overwrought responses to crises. Let's hope we learn from the missteps the current pandemic has engendered. We're sure to find more before it's over.